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DATERIT	A DDI IO ATIONI	سے جنے سے	<b>DETERMINATION RECORD</b>
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cation or Docket Number

MO1673311M

		Епес	tive Octob	per 1, 20	J00			·	07/	0 (	224	$\cup$
		CLAIMS A	S FILED -	PART	1	,	9	SMALL E	NTITY		OTHER	THAN
TOTAL OLANG			(Column 1) (Column 2		umn 2)	TYPE			OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS				W	NEW YORK		RATE	FEE	7	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FE		OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			40minus 20=		26			X\$ 9=	1254	OR	X\$18≃	· ·
INDEPENDENT CLAIMS			minus 3 =					X40=		1	X80=	
MULTIPLE DEPENDENT CLAIM PI			RESENT					<del> </del>	OR			
* If the difference in column 1 is less				ss than zero, enter "0" in column 2			,	+135= TOTAL	1000	OR	Ļ	
CLAIMS AS AMENDED - PART II									1007	OR	TOTAL	
		(Column 1)	4101F145F	(Column 2) (Column 3)				SMALL	ENTITY	OR	OTHER	
WENT A	No.	CLAIMS REMAINING AFTÉR AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MU	Minus	***	CL AINA	]=		X40=		OR	X80=	
<u> </u>		THE RESERVE OF MICE	. LE DEF	CIADEIAI	CLAIM			+135=	A.	OR	+270=	
							Al	TOTAL DDIT: FEE		OR	TOTAL ADDIT, FEE	
	· · · · · · · · · · · · · · · · · · ·	(Column 1)		(Colur		(Column 3)	,			•		
AMENDMENT B	:	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent FIRST PRESE	NTATION OF MI	Minus	PENDENT	CL AIM	<u> </u> =		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
	—— ×	(Column 1)		(Colun		(Column 3)	_			,		
AMENDMENT C	Property of the second	CLAIMS REMAINING	· · · · · · · · · · · · · · · · · · ·	HIGH NUME	BER	PRESENT	$\Gamma$		ADDI-		1	ADDI-
	of the same	AFTER AMENDMENT		PREVIC PAID I		EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
ND	Total	•	Minus	**		= •		X\$ 9=	40-	OR	X\$18=	
AME	Independent	•	Minus	***		=		X40=	`		X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM		]  -			OR	, ,,,,,,	
								ı ı		į · ·		] ]
ا ٠	I the entry in colur	mn 1 ∔s less than th	ie entry in colu	mn 2. write	"0" in co	lumn 3		+135=		OR	+270=	
•••	I the entry in colur I the "Highest Nur II the "Highest Nur	mn 1 is less than th mber Previously Pa mber Previously Pa iber Previously Pai	ad For" IN THIS	S SPACE is S SPACE is	less tha	n 20, enter "20."	 . AC	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	

FORM PTO-875 (Rev. 8/00)

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